

**FEC
FORM 1****STATEMENT OF
ORGANIZATION**

(See instructions)

Office use only

1. NAME OF
COMMITTEE (in full)☐(Check if name
is changed)Example: If typing, type
over the lines

12FE4M5

Allstate Insurance Company Political Action Committee

ADDRESS (number and street)

2775 Sanders Road☐(Check if address
is changed)**Suite A5****Northbrook****IL****60062**

CITY ▲

STATE ▲

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

MOLSON3@allstate.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

n/a

COMMITTEE'S FAX NUMBER

847-402-9757

2. DATE

12**18****2006**

3. FEC IDENTIFICATION NUMBER

C C00040253

4. IS THIS STATEMENT

☐

NEW (N)

OR

☒

AMENDED (A)

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete

Type or Print Name of Treasurer

Steven C. Verney

Signature of Treasurer

Electronically Filed by **Steven C. Verney**

Date

12**18****2006**

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. § 437g.

ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS

Office
Use
OnlyFor further information contact:
Federal Election Commission
Toll Free 800-424-9530
Local 202-694-1100**FEC FORM 1**
(Revised 02/2003)

5. TYPE OF COMMITTEE (Check One)

- (a) ☐ This committee is a principal campaign committee. (Complete the candidate information below.)
- (b) ☐ This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)

Name of
CandidateCandidate
Party AffiliationOffice
Sought:

House

Senate

President

State

District

- (c) ☐ This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of
Candidate

- (d) ☐ This committee is a (National, State (or subordinate) committee of the (Democratic, Republican, etc.) Party.

- (e) ☒ This committee is a separate segregated fund

- (f) ☐ This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee.

6. Name of Any Connected Organization or Affiliated Committee

Allstate Insurance Company

Mailing Address

2775 Sanders Road

Suite A5

Northbrook

IL

60062

CITY ▲

STATE ▲

ZIP CODE ▲

Relationship

Corp. Affiliation

Type of Connected Organization:

- ☒ Corporation ☐ Corporation w/o Capital Stock ☐ Labor Organization
- ☐ Membership Organization ☐ Trade Association ☐ Cooperative

Write or Type Committee Name

Allstate Insurance Company Political Action Committee

7. **Custodian of Records:** Identify by name, address, (phone number -- optional), and position of the person in possession of Committee books and records.

Full Name **Steven C. Verney**

Mailing Address **2775 Sanders Road**

Suite A5

Northbrook **IL** **60062** -

Title or Position ▼ **CITY ▲** **STATE ▲** **ZIP CODE ▲**

Treasurer Telephone number **847** - **402** - **6575**

8. **Treasurer:** List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name of Treasurer **Steven C. Verney**

Mailing Address **2775 Sanders Road**

Suite A5

Northbrook **IL** **60062** -

Title or Position ▼ **CITY ▲** **STATE ▲** **ZIP CODE ▲**

Treasurer Telephone number **847** - **402** - **6575**

Full Name of Designated Agent **Mario Rizzo**

Mailing Address **3075 Sanders Road**

Suite G2H

Northbrook **IL** **60062** -

Title or Position ▼ **CITY ▲** **STATE ▲** **ZIP CODE ▲**

Assistant Treasurer Telephone number **847** - **402** - **7621**

9. **Banks or Other Depositories:** List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.

Fifth Third Bank

Mailing Address

105 S. York Street

Elmhurst

IL

60126

CITY ▲

STATE ▲

ZIP CODE ▲

Image# 26930740804

Form/Schedule: **F1A**

Transaction ID:

This amended registration is being filed to remove Barry Paul and appoint Mario Rizzo as Assistant Treasurer and update e-mail and fax contact information. Please make the necessary changes to your records.
